PATENT APPLICATION FEE DETERMINATION RECORD								Application or Docket Number				
Effective December 8, 2004								10/577286				
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENT	1TY	OR	OTHER 1		
U.S. NATIONAL STAGE FEES			(Column 1)		(00:00:00:00	1	RATE	FEE		RATE	FEE	
BASIC FEE			SMALL ENT. = \$	150 LAR	RGE ENT. = \$ 300	1	BASIC FEE	151).	OR	BASIC FEE		
EXAMINATION FEE			Satisfies PCT-Article		other-situations = \$ 100 / \$ 200	1	EXAM. FEE	77	. ·	EXAM. FEE		
SEARCH FEE			U.S. ts ISA = \$50 / ALL other countrie \$ 200 / \$ 400	/\$ 100 All o	other situations = \$ 250 / \$ 500		SEARCH FEE	200		SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.			minus 1		/ 50 ≐	1	X \$ 125 =	~ -		X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			15 minus	20 = .			X \$ 25 =		OR	X \$ 50 =		
INDEPENDENT CLAIMS			minu	ıs 3 = .		1	X \$ 100 =		OR	X \$ 200 =	•	
MULTIPLE DEPENDENT CLAIM PRI			ESENT			1	+ \$ 180 =		OR	+ \$ 360 =	<u>.</u>	
* If the difference in column 1 is less than zero, enter "0" in column 2						الجس	TOTAL	450	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						'{{	SMALL E	ENTITY	OR	OTHER THAN R SMALL ENTITY		
.   V		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	"ADDI- TIONAL FEE	:-	RATE	ADDI-" TIONAL FEE	
AMENOMENT	Total	· /5	Minus · **	20	-	1	X \$ 25 =		OR	X \$ 50 =		
MEN	Independent	.6	Minus ***	73	n	1	X \$ 100 =		OR.	X \$ 200 =		
*	FIRST PRES	ENTATION OF M	MULTIPLE DEPEND	DENT CLAIN			+ \$ 180 =		OR	+ \$ 360 =		
TOTAL ADDIT. OR TOT										TOTAL ADDIT. FEE		
,		•			·= • · · · · · ·							
TB		(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MEN	Total		Minus		=	1	X \$ 25 =	Α.	OR	X \$ 50 =		
AMENDMENT	Independent	•	Minus ***	r <del>å</del>	=	1	X \$ 100 =		OR	X \$ 200 =	·	
₹		ENTATION OF N	AULTIPLE DEPEND	DENT CLAIM		1	+ \$ 180 =		OR	+ \$ 360 =		
						ا ال	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	. •										٠.	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Righest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												